

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.
10/554,654

FILING DATE

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/						51						
2		/					52						
3		2					53						
4	④	1					54						
5	1	④					55						
6	④	1					56						
7	1	④					57						
8	④	1					58						
9	1	④					59						
10	④	1					60						
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TOTAL REQ.	/	↓		↓		↓							
TOTAL DEP.	10	←		←		←		↓		↓		↓	
TOTAL CLAIMS	11	████████		████████		████████		←		←		←	